

QUOTATION REQUEST FOR ELECTRIC THERMAL OIL HEATERS

Company Name: _____	
Address: _____	
Phone: _____	E-mail: _____
Project Manager: _____	
OIL SPECIFICATIONS	OPERATING CONDITIONS
Manufacturer: _____	Flow: _____
Trade Name: _____	Temp. IN: _____
Max. Temp.: _____	Temp. OUT: _____
Boiling Temp.: _____	
Yes No	
Pump required: _____	electric power available: _____
Exp. tank required: _____	_____ V _____ A _____ Hz
Oil collecting tank required: _____	Main breaker required: Yes No
Special requirements: _____	

In the U.S.A.

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